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CONFIRMATION NO. 1399

|  |   |                                    |   |  |                                |
|--|---|------------------------------------|---|--|--------------------------------|
| <b>SERIAL NUMBER</b><br>10/524,708   | <b>FILING OR 371(c) DATE</b><br>05/12/2005<br><b>RULE</b>   | <b>CLASS</b><br>604                | <b>GROUP ART UNIT</b><br>3763   | <b>ATTORNEY DOCKET NO.</b><br>HOI-12702/16 |                                |
| <b>APPLICANTS</b><br>Henrik Jacobsen, Copenhagen, DENMARK;<br><b>** CONTINUING DATA *****</b><br>This application is a 371 of PCT/DK03/00533 08/11/2003<br><b>** FOREIGN APPLICATIONS *****</b><br>DENMARK PA 2002-01202 08/12/2002<br><div style="text-align: right;">** SMALL ENTITY **</div>        |   |                                    |   |  |                                |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance<br>Verified and Acknowledged _____<br>Examiner's Signature _____ Initials _____ |   | <b>STATE OR COUNTRY</b><br>DENMARK | <b>SHEETS DRAWING</b><br>10   | <b>TOTAL CLAIMS</b><br>20                  | <b>INDEPENDENT CLAIMS</b><br>1 |
| <b>ADDRESS</b><br>25006  |   |                                    |   |  |                                |
| <b>TITLE</b><br>Device for administration of fluids  |   |                                    |   |  |                                |
| <b>FILING FEE RECEIVED</b><br>630  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                    | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |  |                                |